

Debtor Ola Marie Miller Case number _____

2.3 Income tax returns/refunds.

Check all that apply

- ☒ Debtor(s) will retain any exempt income tax refunds received during the plan term.
- ☐ Debtor(s) will supply the trustee with a copy of each income tax return filed during the plan term within 14 days of filing the return and will turn over to the trustee all non-exempt income tax refunds received during the plan term.
- ☐ Debtor(s) will treat income refunds as follows: _____

2.4 Additional payments.

Check one.

- ☒ **None.** If "None" is checked, the rest of § 2.4 need not be completed or reproduced.

Part 3: Treatment of Secured Claims

3.1 Mortgages. (Except mortgages to be crammed down under 11 U.S.C. § 1322(c)(2) and identified in § 3.2 herein.).

Check all that apply.

- ☐ **None.** If "None" is checked, the rest of § 3.1 need not be completed or reproduced.

3.1(a) Principal Residence Mortgages: All long term secured debt which is to be maintained and cured under the plan pursuant to 11 U.S.C. § 1322(b)(5) shall be scheduled below. Absent an objection by a party in interest, the plan will be amended consistent with the proof of claim filed by the mortgage creditor, subject to the start date for the continuing monthly mortgage payment proposed herein.

1 Mtg pmts to Wells Fargo
Beginning February 2019 @ \$487.00 ☒ Plan ☐ Direct. Includes escrow ☒ Yes ☐ No

1 Mtg arrears to Wells Fargo Through January 2019 \$7,400.00 @ \$123.33/mo

3.1(b) ☐ **Non-Principal Residence Mortgages:** All long term secured debt which is to be maintained and cured under the plan pursuant to 11 U.S.C. § 1322(b)(5) shall be scheduled below. Absent an objection by a party in interest, the plan will be amended consistent with the proof of claim filed by the mortgage creditor, subject to the start date for the continuing monthly mortgage payment proposed herein.

Property **-NONE-**
address: _____

Mtg pmts to _____
Beginning month @ _____ Plan Direct. Includes escrow Yes No

Property **-NONE-** Mtg arrears to _____ Through month _____

3.1(c) ☐ **Mortgage claims to be paid in full over the plan term:** Absent an objection by a party in interest, the plan will be amended consistent with the proof of claim filed by the mortgage creditor.

Creditor: **-NONE-** Approx. amt. due: _____ Int. Rate*: _____

Property Address: _____

Principal Balance to be paid with interest at the rate above: _____

(as stated in Part 2 of the Mortgage Proof of Claim Attachment)

Portion of claim to be paid without interest: \$ _____

(Equal to Total Debt less Principal Balance)

Special claim for taxes/insurance: \$ _____ **-NONE-** /month, beginning month .
(as stated in Part 4 of the Mortgage Proof of Claim Attachment)

* Unless otherwise ordered by the court, the interest rate shall be the current Till rate in this District
Insert additional claims as needed.

3.2 Motion for valuation of security, payment of fully secured claims, and modification of undersecured claims. Check one..

- ☒ **None.** If "None" is checked, the rest of § 3.2 need not be completed or reproduced.

Debtor Ola Marie Miller Case number _____

3.3 Secured claims excluded from 11 U.S.C. § 506.

Check one.

☐

None. If "None" is checked, the rest of § 3.3 need not be completed or reproduced.

☒

The claims listed below were either:

(1) incurred within 910 days before the petition date and secured by a purchase money security interest in a motor vehicle acquired for the personal use of the debtor(s), or

(2) incurred within 1 year of the petition date and secured by a purchase money security interest in any other thing of value.

These claims will be paid in full under the plan with interest at the rate stated below. Unless otherwise ordered by the court, the claim amount stated on a proof of claim filed before the filing deadline under Bankruptcy Rule 3002(c) controls over any contrary amount listed below. In the absence of a contrary timely filed proof of claim, the amounts stated below are controlling.

Name of Creditor	Collateral	Amount of claim	Interest rate*
Credit Acceptance	2017 Nissan Versa	\$14,706.00	6.75%

*Unless otherwise ordered by the court, the interest rate shall be the current Till rate in this District.

Insert additional claims as needed.

3.4 Motion to avoid lien pursuant to 11 U.S.C. § 522.

Check one.

☒

None. If "None" is checked, the rest of § 3.4 need not be completed or reproduced.

3.5 Surrender of collateral.

Check one.

☐

None. If "None" is checked, the rest of § 3.5 need not be completed or reproduced.

☒

The debtor(s) elect to surrender to each creditor listed below the collateral that secures the creditor's claim. The debtor(s) request that upon confirmation of this plan the stay under 11 U.S.C. § 362(a) be terminated as to the collateral only and that the stay under § 1301 be terminated in all respects. Any allowed unsecured claim resulting from the disposition of the collateral will be treated in Part 5 below.

Name of Creditor	Collateral
1st Heritage Credit	various items
Acceptance Now	Furniture

Insert additional claims as needed.

Part 4: Treatment of Fees and Priority Claims

4.1 General

Trustee's fees and all allowed priority claims, including domestic support obligations other than those treated in § 4.5, will be paid in full without post petition interest.

4.2 Trustee's fees

Trustee's fees are governed by statute and may change during the course of the case.

4.3 Attorney's fees.

☒ No look fee: 3,600.00

Total attorney fee charged: \$3,600.00

Attorney fee previously paid: \$0.00

Attorney fee to be paid in plan per confirmation order: \$3,600.00

Debtor Ola Marie Miller

Case number _____

☐ Hourly fee: \$_____. (Subject to approval of Fee Application.)**4.4 Priority claims other than attorney's fees and those treated in § 4.5.***Check one.*

- ☒ **None.** If "None" is checked, the rest of § 4.4 need not be completed or reproduced.
- ☐ Internal Revenue Service \$0.00
- ☐ Mississippi Dept. of Revenue \$0.00
- ☐ Other _____ \$0.00

4.5 Domestic support obligations.☒ **None.** If "None" is checked, the rest of § 4.5 need not be completed or reproduced.**Part 5: Treatment of Nonpriority Unsecured Claims****5.1 Nonpriority unsecured claims not separately classified.**

Allowed nonpriority unsecured claims that are not separately classified will be paid, pro rata. If more than one option is checked, the option providing the largest payment will be effective. *Check all that apply.*

- ☐ The sum of \$ _____
- ☒ 0.00 % of the total amount of these claims, an estimated payment of \$ 0.00
- ☐ The funds remaining after disbursements have been made to all other creditors provided for in this plan.

If the estate of the debtor(s) were liquidated under chapter 7, nonpriority unsecured claims would be paid approximately \$0.00.
Regardless of the options checked above, payments on allowed nonpriority unsecured claims will be made in at least this amount.

5.2 Other separately classified nonpriority unsecured claims (special claimants). Check one.☒ **None.** If "None" is checked, the rest of § 5.3 need not be completed or reproduced.**Part 6: Executory Contracts and Unexpired Leases****6.1 The executory contracts and unexpired leases listed below are assumed and will be treated as specified. All other executory contracts and unexpired leases are rejected. Check one.**☒ **None.** If "None" is checked, the rest of § 6.1 need not be completed or reproduced.**Part 7: Vesting of Property of the Estate****7.1 Property of the estate will vest in the debtor(s) upon entry of discharge.****Part 8: Nonstandard Plan Provisions****8.1 Check "None" or List Nonstandard Plan Provisions**☒ **None.** If "None" is checked, the rest of Part 8 need not be completed or reproduced.**Part 9: Signatures:****9.1 Signatures of Debtor(s) and Debtor(s)' Attorney**

The Debtor(s) and attorney for the Debtor(s), if any, must sign below. If the Debtor(s) do not have an attorney, the Debtor(s) must provide their complete address and telephone number.

X /s/ Ola Marie MillerOla Marie Miller

Signature of Debtor 1

X _____

Signature of Debtor 2

Debtor	Ola Marie Miller	Case number	
Executed on	January 14, 2019	Executed on	
328 Myer Avenue			
Address		Address	
Jackson MS 39209-0000			
City, State, and Zip Code		City, State, and Zip Code	
Telephone Number		Telephone Number	
 X	/s/ Blake Tyler	Date	January 14, 2019
	Blake Tyler		
Signature of Attorney for Debtor(s)			
511 East Pearl Street			
Jackson, MS 39201			
Address, City, State, and Zip Code			
601-355-0654		101786 MS	
Telephone Number		MS Bar Number	
btyler@pgtlaw.com			
Email Address			